

# PURCHASE ORDER

DEPARTMENT OF SOCIAL WELFARE & DEVELOPMENT  
IBP Road, Constitution Hills, Quezon City

# 895

Supplier :	HOTEL SALCEDO DE VIGAN	PO No. :	2018-08-0974
Address :	V. delos Reyes cor. Gen. Luna St., Vigan City	Date :	August 31, 2018
Tel. No. :	0917-8011881	Mode of Procurement :	Negotiated Procurement - Lease of Venue
Philgeps #	2009-54729		
TIN	006-449-197		

Gentlemen:  
Please furnish this office the following articles subject to the terms and conditions contained herein:


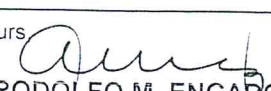
Place of Delivery:	HOTEL SALCEDO DE VIGAN	Payment Term:	Advise to Debit Account (ADA)
Date of Delivery:		Payment Term:	Fifteen (15) to Thirty (30) days upon completion of supporting documents (per batch)

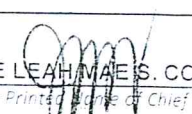
Stock / Property No.	Unit	Description	Qty.	Unit Amount	Amount
	pax	Crafting of Operational Guidelines/ Manual of Operationals for DSWD LED Clusters under the NRDP: FNFI Cluster Members Writeshop Date of the Activity: September 10-15, 2018 Minimum Guaranteed No. of Pax: 45 pax Room Accommodation: Triple sharing rooms with separate bed per pax Check-In Date and Time: September 10, 2018; 2:00 pm Check-Out Date and Time: September 15, 2018; 12:00 noon Menu Selection: Hotel to submit menu Type of Serving: Guided buffet for breakfast, lunch and dinner; Plated for AM and PM Snacks Rice with 2-viands (fish/chicken/meat-NO PORK) and soup, vegetable, fresh fruits/ dessert and drinks Schedule of Serving: Day 1 - Lunch, PM Snack, Dinner Day 2-5 - Breakfast, AM Snacks, Lunch, PM Snacks & Dinner Day 6 - Breakfast, and AM Snacks Inclusions: 1. Facilities and Amenities: a. Can provide basic amenities like use of function rooms for 50 pax; with strong and stable access to internet, with WIFI in rooms and function rooms; with space for small group discussion; Free use of LCD projector & screen, whiteboard, microphone, extension wires; Free electricity for other workshop equipment; Free flowing coffee and free candies and available room for breakout session.	50	1,500.00	375,000.00

(Total Amount in Words) Page 1 of 2 P 0.00

In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.

Billing Statement must be submitted within five (5) working days after the conduct of event.

Conforme:  <u>JENNIFER BARAL</u> Signature over printed name of Supplier <u>SEPT-10-2018</u> Date	Very truly yours,  <u>RODOLFO M. ENCABO</u> Signature over Printed Name of Authorized Official Director, DRMB Designation
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Fund Cluster: _____ Funds Available: _____   <u>JUBIE LEAH MAE S. COLES</u> Signature over Printed Name of Chief Accountant/ Head of Accounting Division/Unit	ORS/BURS No.: _____ Date of the ORS/BURS: Amount: _____
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Date of Delivery:		Payment Term:	Fifteen (15) to Thirty (30) days upon completion of supporting documents (per batch)

Stock / Property No.	Unit	Description	Qty.	Unit Amount	Amount
		<p><b>Inclusions:</b></p> <ul style="list-style-type: none"> <li>b. The venue can offer spacious conference hall &amp; good facilities that can make the activity conducive for the participants;</li> <li>c. At least two (2) microphones (w/ at least 2-units of wireless microphones);</li> <li>d. Free flowing coffee or tea, nuts and candies during session;</li> <li>e. Free notepads and pencils/ballpens.</li> </ul> <p><b>Note:</b></p> <p>Hotels/restaurants/resorts should not be offering short term lodging associated with motels and should not be situated beside or across gambling establishment shops, night club, funeral parlor, mortuaries and other similar ilks that may touch on cultural sensitivities.</p> <p style="margin-top: 20px;">AOQ NO. 18-1153 NP-LV PR No. 2018072363</p>			<b>375,000.00</b>

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(Total Amount in Words)	<b>THREE HUNDRED SEVENTY-FIVE THOUSAND PESOS ONLY</b>	P	<b>375,000.00</b>
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**Billing Statement must** be submitted within five (5) working days after the conduct of event.

<p>Conforme:</p> <div style="text-align: center;"> <p><b>JENNIFER BARAL</b></p> <p>Signature over Printed Name of Supplier</p> <p style="margin-top: 5px;">SEP-10-2018</p> <p style="text-align: center; font-size: 0.8em;">Date</p> </div>	<p style="text-align: right;">Very truly yours,</p> <div style="text-align: center;"> <p><b>RODOLFO M. ENCABO</b></p> <p>Signature over Printed Name of Authorized Official</p> <p style="margin-top: 5px;"><b>Director, DRMB</b></p> <p style="text-align: center; font-size: 0.8em;">Designation</p> </div>
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<p>Fund Cluster: _____</p> <p>Funds Available: _____</p> <div style="text-align: center; margin-top: 20px;"> <p><b>JUBIE LEAH MAE S. COLES</b></p> <p>Signature over Printed Name of Chief Accountant/ Head of Accounting Division/Unit</p> </div>	<p>ORS/BURS No.: _____</p> <p>Date of the ORS/BURS: _____</p> <p>Amount: _____</p> <p style="text-align: right; font-size: 1.5em; font-family: cursive;">375,000</p>
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